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UNITED STATES BANKRUPTCY COURT DISTRICT OF HAWAII	Case No.: 09-00516
In re: John Langenstein <div style="text-align: right;">Debtor(s).</div>	Chapter: 13

COVER SHEET FOR AMENDMENTS

<i>Check all of the following that are being amended.</i> Schedules: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> G <input type="checkbox"/> H <input type="checkbox"/> I <input checked="" type="checkbox"/> J Schedules: <input checked="" type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F (\$26 fee for 1 or more)	<input type="checkbox"/> List of Creditors / Mailing Matrix (\$26 fee unless (i) only updating an address, or (ii) only adding a creditor's attorney, or (iii) uploading creditors in ECF without amending schedules)
<input type="checkbox"/> Statement of Financial Affairs	
<input type="checkbox"/> Statement of Intention	<input type="checkbox"/> List of Equity Security Holders
<input type="checkbox"/> Ch 7 Current Monthly Income with Means Test	<input type="checkbox"/> List of 20 Largest Unsecured Creditors
<input type="checkbox"/> Ch 13 Current Monthly Income with Disposable Income Calculation	<input type="checkbox"/> Chapter 11 Current Monthly Income

DECLARATION BY DEBTOR(S)

I declare under penalty of perjury that the attached amendments are correct to the best of my knowledge, information, and belief. *[If filing electronically through ECF, a Declaration re: Electronic Filing with original signatures must be submitted on paper within 5 business days after filing the amendments.]*

7/30/2009
Date

/s/John Langenstein
John Langenstein
Debtor

CERTIFICATE OF SERVICE

The undersigned certifies:

- ☒ Notice of the amendments has been served on all creditors and parties in interest on the attached service list. (If exemptions or exemption amounts have been amended, a copy of Schedule C has been served on all creditors and parties in interest, including the U.S. Trustee and Trustee.)
- ☐ A copy of the Notice of Bankruptcy Case, Meeting of Creditors, & Deadlines has been served on the additional creditors and parties in interest identified on the attached service list.

Dated: 7/30/2009

/s/Donald L. Spafford, Jr.
Donald L. Spafford, Jr. 6188

United States Bankruptcy Court
District of Hawaii

In re **John Langenstein**

Debtor

Case No. **09-00516**Chapter **13**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	110,000.00		
B - Personal Property	Yes	4	615,962.41		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		270,818.59	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		125,241.28	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			6,560.48
J - Current Expenditures of Individual Debtor(s)	Yes	2			4,107.87
Total Number of Sheets of ALL Schedules		18			
Total Assets			725,962.41		
Total Liabilities				396,059.87	

**United States Bankruptcy Court
District of Hawaii**

In re John Langenstein

Debtor

Case No. 09-00516Chapter 13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

- ☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	
Student Loan Obligations (from Schedule F)	
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	
TOTAL	

State the following:

Average Income (from Schedule I, Line 16)	
Average Expenses (from Schedule J, Line 18)	
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column		
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		
4. Total from Schedule F		
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		

In re **John Langenstein**Case No. **09-00516**

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T C O M M U N I T Y	D A T E C L A I M W A S I N C U R R E D, N A T U R E O F L I E N, A N D D E S C R I P T I O N A N D V A L U E O F P R O P E R T Y S U B J E C T T O L I E N	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M W I T H O U T D E D U C T I N G V A L U E O F C O L L A T E R A L	U N S E C U R E D P O R T I O N, I F A N Y
Account No. 4637			11/3/1995					
American Savings Bank P.O. Box 2300 Honolulu, HI 96804-2300			First Mortgage house on leasehold property at 84-4956 Mamalahoa Hwy., Honauanau, HI 96726				16,860.00	0.00
Value \$			50,000.00					
Account No. 2001			8/29/2007					
Bank of Hawaii Legal & Custody Dept. P.O. Box 2900 Honolulu, HI 97846			2007 Toyota FJ Cruiser (22,583 miles)				21,022.00	172.00
Value \$			20,850.00					
Account No.			2006					
First Hawaiian Bank Loan Recovery Dept. P.O. Box 4070 Honolulu, HI 96812-9941			Purchase Money Security 2006 Chevrolet Silverado Truck (35,543 miles)				17,893.00	1,368.00
Value \$			16,525.00					
Account No. 2374			6/24/2006					
Law Offices of Richard Mcknight 330 S. Third St., #900 Las Vegas, NV 89101			Non-Purchase Money Security Promissory Note payable by Kona Farms, LLC, Garnett Hall, Ken Holt and Jeff and Edie Gremore and their respective trusts and companies (subject of litigation)				215,043.59	0.00
Value \$			266,000.00					
Subtotal (Total of this page)							270,818.59	1,540.00
Total (Report on Summary of Schedules)							270,818.59	1,540.00

0 continuation sheets attached

In re John Langenstein

Debtor(s)

Case No. 09-00516**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	<u>0.00</u>
a. Are real estate taxes included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
b. Is property insurance included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
2. Utilities:	\$	<u>250.00</u>
a. Electricity and heating fuel	\$	<u>40.00</u>
b. Water and sewer	\$	<u>50.00</u>
c. Telephone	\$	<u>405.00</u>
d. Other <u>See Detailed Expense Attachment</u>	\$	<u>100.00</u>
3. Home maintenance (repairs and upkeep)	\$	<u>500.00</u>
4. Food	\$	<u>75.00</u>
5. Clothing	\$	<u>100.00</u>
6. Laundry and dry cleaning	\$	<u>80.00</u>
7. Medical and dental expenses	\$	<u>450.00</u>
8. Transportation (not including car payments)	\$	<u>0.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	<u>40.00</u>
10. Charitable contributions	\$	<u>80.00</u>
11. Insurance (not deducted from wages or included in home mortgage payments)	\$	<u>0.00</u>
a. Homeowner's or renter's	\$	<u>193.00</u>
b. Life	\$	<u>160.00</u>
c. Health	\$	<u>75.00</u>
d. Auto	\$	
e. Other <u>Liability for BAC farm</u>	\$	
12. Taxes (not deducted from wages or included in home mortgage payments)	\$	<u>100.00</u>
(Specify) <u>Real property taxes on 6 acres</u>		
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	\$	
a. Auto	\$	<u>0.00</u>
b. Other <u>Chevrolet truck loan (to be paid through plan)</u>	\$	<u>460.22</u>
c. Other <u>Toyota FJ Cruiser loan (to be paid through plan)</u>	\$	<u>549.15</u>
14. Alimony, maintenance, and support paid to others	\$	<u>0.00</u>
15. Payments for support of additional dependents not living at your home	\$	<u>0.00</u>
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	<u>0.00</u>
17. Other <u>See Detailed Expense Attachment</u>	\$	<u>400.50</u>
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	<u>4,107.87</u>
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		
<hr/>		
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 15 of Schedule I	\$	<u>6,560.48</u>
b. Average monthly expenses from Line 18 above	\$	<u>4,107.87</u>
c. Monthly net income (a. minus b.)	\$	<u>2,452.61</u>

In re John LangensteinCase No. 09-00516

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**Detailed Expense Attachment****Other Utility Expenditures:**

Cell phone	\$	45.00
Propane	\$	200.00
Cable, internet and TV	\$	160.00
Total Other Utility Expenditures	\$	405.00

Other Expenditures:

Lease payments to Bishop Estate	\$	250.00
Personal care expenses	\$	40.00
Misc./unexpected expenses	\$	100.00
Bank fees	\$	10.50
Total Other Expenditures	\$	400.50

AES/NCT
Pob 2461
Harrisburg, PA 17105

American Express
Customer Service
P.O. Box 7863
FT. Lauderdale, FL 33329-7863

American Savings Bank
P.O. Box 2300
Honolulu, HI 96804-2300

Bank of America
P.O. Box 15726
Wilmington, DE 19886-5726

Bank of Hawaii
Legal & Custody Dept.
P.O. Box 2900
Honolulu, HI 97846

Bolton Inc.
PO Box 898
Kailua Kona, HI 96745

Bruce Birt Family Trust
c/o Ellsworth Moody & Bennion
7881 Charleston Blvd., #210
Las Vegas, NV 89117

Chase
Bank One Card Service
Westerville, OH 43081

Citibank Student Loans
701 E. 60th Street
Sioux Falls, SD 57104

Creative Lifestyles
c/o Ellsworth Moddy & Bennion
7881 W. Charleston Blvd., #210
Las Vegas, NV 89117

First Hawaiian Bank
Loan Recovery Dept.
P.O. Box 4070
Honolulu, HI 96812-9941

Franklin, Barbara
45-3438 Mamane St., Bldg. 2
Honokaa, HI 96727

Freedom of Nevada Trust
c/o Ellsworth Moody & Bennion
7881 W. Charleston Blvd., #210
Las Vegas, NV 89117

Kamehameha Schools
PO Box 30680
Honolulu, HI 96820

Kona Farms, LLC
c/o Ellsworth Moody & Bennion
7881 Charleston Blvd., #210
Las Vegas, NV 89117

Law Offices of Richard Mcknight
330 S. Third St., #900
Las Vegas, NV 89101

Racer K, LLC
c/o Ellsworth Moody & Bennion
7881 W. Charleston Blvd., #210
Las Vegas, NV 89117

Sallie Mae
PO Box 9500
Wilkes Barre, PA 18773

Wells Fargo
301 E. 58th St. N
Sioux Falls, SD 57104